IOM AIMS (ADAPTED FOR MH)	PATIENT PERCEPTION QUALITY INDICATOR	ADMINISTRATIVE QUALITY INDICATOR
Patient Safety – Services are provided in an emotionally and physically safe, compassionate, trusting, and caring treatment/working environment for all clients, family members, and staff.	 Safety of the environment. Signs and directions to treatment areas. Attention to privacy. Degree of confidentiality. 	Number of Medication Errors Client Suicides Seclusion/Restraint
Timeliness – Goal-directed services are promptly provided in order to restore and sustain the integration of clients and families into the community.	 Length of time between making appointment and seeing psychiatrist/therapist. Time spent in waiting area for your scheduled appointment. Hours appointments are available. Ability to reach desired dept. or person by phone. Organization of weekday/holiday program schedule. 	Number of days to get initial appointment.
Efficiency – Human and physical resources are managed in ways that minimize waste and optimize access to appropriate treatment.	 Appropriate therapies and interventions offered. Ability of services to meet your needs. 	Readmissions w/30 days. Cost per Client Served Cost per Unit of Service Productivity by Service
Patient-centeredness – A highly individualized comprehensive approach to assessment and services is used to understand each individual's and family's history, strengths, needs, and vision of their own recovery including attention to the issues of culture, spirituality, trauma, and other factors. Service plans and outcomes are built upon respect for the unique preferences, strengths, and dignity of each person. Effectiveness – Up-to-date evidence-based services are provided in response to and	 Opportunity to participate in decisions about your treatment. Extent to which your individual needs were addressed. Availability of staff to talk with you. Helpfulness of staff. Concern of staff Arrangements for you to pay bill without unnecessary hardship. Reasonableness of fees. Degree to which treatment helped with problem. 	Prevention Services/Educational Efforts Case Management/Outreach Staff to Client Ratios Staff Distribution Vocational Outcomes - % of clients employed at
respectful of individual choice and preference. Equity – Access and quality of care do not vary	Willingness to return to treatment. Look at all of the above by	completion of treatment. Client Attendance (# of Noshows) Look at all of the above
because of race ethnicity, age, gender, religion, sexual orientation, disability, diagnosis, geographic location, socioeconomic status, legal status.	demographic variables.	measures by demographic variables.